



## Water Compliance Inspection Report

### Section A: National Data Coding (i.e., PCS)

Transaction	Code	NPDES	yr / mo / dy	Inspection Type	Inspector	FacType																						
1	N	2	5	3	T	N	0	0	2	0	5	9	1	11	12	1	2	1	1	0	8	17	18	C	19	S	20	1
Remarks																												
21																												
Inspection Work Days																												
Facility Self-Monitoring Evaluation Rating																												
BI																												
QA																												
Reserved																												
67																												
69																												
70																												
3																												
71																												
N																												
72																												
N																												
73																												
74																												
75																												

### Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)		Entry Time / Date	Permit Effective Date
Bell Buckle STP		9:15/10/26/2012	10/1/1988
Hwy 269		Exit Time / Date	Permit Expiration Date
Bell Buckle, TN 37020		12:15/10/26/12	8/30/2013
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)		Other Facility Data (e.g., SIC NAICS, and other descriptive information)	
Mr. Randy Johnson operator		931-389-9566	
Name, Address of Responsible Official / Title / Phone and Fax Number			
Honorable Dennis Webb, Mayor		931-389-9513	
8 Railroad Square			
P.O. Box 276			
Bell Buckle, TN 37020			
Contacted			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

### Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

<input checked="" type="checkbox"/> Permit	<input checked="" type="checkbox"/> Self-monitoring Program	<input type="checkbox"/> Pretreatment Program	<input type="checkbox"/> MS4
<input checked="" type="checkbox"/> Records / Reports	<input type="checkbox"/> Compliance Schedule	<input type="checkbox"/> Pollution Prevention	
<input checked="" type="checkbox"/> Facility Site Review	<input checked="" type="checkbox"/> Laboratory	<input type="checkbox"/> Storm Water	
<input checked="" type="checkbox"/> Effluent / Receiving Waters	<input checked="" type="checkbox"/> Operation & Maintenance	<input type="checkbox"/> Combined Sewer Overflow	
<input checked="" type="checkbox"/> Flow Measurement	<input checked="" type="checkbox"/> Sludge Handling / Disposal	<input checked="" type="checkbox"/> Sanitary Sewer Overflow	

### Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes	SEV Description	
<input type="checkbox"/>	See attached letter.	
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/>		
Name (s) and Signature(s) of Inspector(s)	Agency / Office / Phone and Fax Numbers	Date
Gary Horne ES-3 	Tennessee Division of Water Pollution Control Columbia Environmental Field Office 931 490 3940 / 931 380-3397 (FAX)	11/8/2012
Signature of Management Q A Reviewer	Agency / Office / Phone and Fax Numbers	Date
Ryan Owens EFOM 	Tennessee Division of Water Pollution Control Columbia Environmental Field Office 931 490 3941 / 931 380-3397 (FAX)	11/8/2012